21-158, Catherine Byrnes, DVM

BEFORE THE ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

IN THE MATTER OF:

CATHERINE BYRNES, DVM
HOLDER OF LICENSE NO. 6340
FOR THE PRACTICE OF VETERINARY
MEDICINE IN THE STATE OF ARIZONA,

RESPONDENT.

CASE NO.: 21-158

FINDINGS OF FACT,
CONCLUSIONS OF LAW
AND ORDER

AND ORDER

RESPONDENT.

On February 16, 2022, the Arizona State Veterinary Medical Examining Board conducted an Informal Interview regarding Catherine Byrnes, DVM ("Respondent"). The proceedings in this matter are governed by A.R.S. § 32-2234 (A). The proceedings in this matter are governed by A.R.S. § 32-2234 (A). Respondent was advised of her right to legal counsel by letter, appeared telephonically and participated in the Informal Interview with counsel, David Stoll. The Board reviewed all documents submitted regarding this matter, took testimony from Respondent and Ms. Karen Momany and proceeded as is permitted by A.R.S. § 32-2234 (A).

Following the Informal Interview and the Board's discussion of the information and documents submitted, the Board determined that Respondent's conduct constituted unprofessional conduct pursuant ARS § 32-2232 (12) as it relates to AAC R3-11-501 (1) failure to provide professionally acceptable procedures. After considering all of the information and testimony, the Board issues the following Findings of Fact, Conclusions of Law and Order, ("Order").

FINDINGS OF FACT

- 1. Respondent is the holder of License No. 6340 issued on October 16, 2013, and is therefore authorized to practice the profession of veterinary medicine in the State of Arizona.
- 2. On June 4, 2021, "Olive," a 6-year-old female Miniature Dachshund was presented to Respondent after being bitten by a rattlesnake. Complainant witnessed the dog get bit. Upon exam, Respondent recorded the dog had a weight = 15 pounds, a temperature = 102.2 degrees, a heart rate = 120bpm, and a respiration rate = 20rpm. She noted two wounds over the occipital portion of the skull with mild swelling to the masseter muscles, consistent with a snake bite. The dog was depressed and painful, but responsive. There was profound halitosis; the dog was drooling and holding her mouth partially open but could swallow and move her jaw. Respondent believed this was secondary to pain and swelling of the masseter muscles. She suspected that the amount of venom that the dog received may have been fairly minimal if she had been running away from the snake when it struck, thus receiving her injuries to the back of the head. The dog appeared stable at that time.
- 3. Respondent discussed her findings with Complainant. She explained that the dog's response to treatment depended on several factors, including amount of venom received, location of the bite, and individual variation in response to venom and therapy. Complainant approved the treatment plan for supportive care, diagnostics, monitoring, and possible anti-venom treatment.

- a. Diphenhydramine 0.3mL SQ;
- b. Dexamethasone Sodium Phosphate 0.35mL SQ; and
- c. Buprinex DS (double strength) 0.25mL SQ.
- 5. Blood work had some mild changes but nothing significant noted. PT 22.7; aPTT 78. Due to the dog being stable and Respondent not believing the snake bite was severe, she chose not to administer the dog anti-venom treatment.
 - 6. The dog was monitored throughout the day.
- 7. At 2:00pm (states 3:00pm on blood work), recheck blood work was performed. Again, there were mild changes but nothing concerning. However, the platelets decreased from 265 to 170. Respondent felt that was to be expected. The dog's vitals were T = 99.1 degrees, P = 120bpm, R = 20rpm.
- 8. Respondent stated in her narrative that the dog was still lethargic but she attributed that to the pain of her injuries. The vitals continued to be stable; after consulting with her associate, Dr. Flannery, it was decided to not administer the dog anti-venom at that time.
- 9. The dog continued to be monitored until discharge at 5:00pm. Since the premises does not provide 24-hour care, Respondent instructed Complainant to take the dog to an emergency facility if she felt the dog was deteriorating. The IV catheter was left in place if additional care was needed that evening. If the dog did well throughout the night, Complainant was to bring the dog back in the morning for evaluation and IV catheter removal. Complainant was

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provided a copy of the dog's medical records, blood work, and contact information for the emergency facility in Prescott. The dog was discharged with gabapentin 100mg, 21 capsules; give one capsule two - three times a day as needed.

- 10. Complainant stated that when the dog was brought out to her, she was swollen. She was given signs to look for to help determine the dog was not doing well and needed to be taken to the emergency facility - vomiting, diarrhea, or labored breathing.
- 11. In the early morning hours, the dog passed away. Complainant stated that the dog never exhibited any of the signs she was warned about. However, the dog was twice her size and weight due to swelling.
- 12. The next morning, Complainant brought the dog's remains to the premises for a private cremation. She spoke to Dr. Flannery about her concerns that the dog was not administered anti-venom, which she pre-approved, and that they could not keep the dog overnight for monitoring. Respondent was not in the office this day.
- 13. Dr. Flannery offered her condolences on the death of the dog and tried to answer Complainants questions. Complainant reported that the dog seemed to be doing well after they arrived home. However, she wanted to know why they did not keep the dog overnight for monitoring and why the antivenom was not administered. Dr. Flannery stated that they do not keep pets overnight unless they are boarding and stable. She further advised that the dog seemed hematologically stable at discharge. Dr. Flannery could not say whether or not would still be alive if the anti-venom had been administered.

She explained that even when administered anti-venom, some pets still die due to the neurotoxin.

CONCLUSIONS OF LAW

14. The Findings of Fact constitutes a violation of **A.R.S. §32-2232 (12)** as it relates to **A.A.C. R3-11-501 (1)** for failure to provide professionally acceptable procedures by not communicating the pros and cons of administering the antivenom and not referring the dog directly to an emergency facility for continued monitoring.

ORDER

Based upon the foregoing Findings of Fact and Conclusions of Law it is **ORDERED** that Respondent's License, No. 6340 be placed on **PROBATION** for a period of one (1) year, subject to the following terms and conditions that shall be completed within the Probationary period. These requirements include four (4) total hours of continuing education (CE) and reimbursement to the complainant as detailed below:

1. IT IS ORDERED THAT Respondent shall provide written proof satisfactory to the Board that she has completed four (4) hours of continuing education (CE); hours earned in compliance with this order shall not be used for licensure renewal. Respondent shall satisfy these four (4) hours by attending CE in the area of emergency medicine in relation to snakebite envenomation. Respondent shall submit written verification of attendance to the Board for approval.

- 3. All continuing education to be completed for this Order shall be preapproved by the Board. Respondent shall submit to the Board a written outline regarding how she plans to satisfy the requirements in paragraph 1 for its approval within sixty (60) days of the effective date of this Order. The outline shall include CE course details including, name, provider, date(s), hours of CE to be earned, and a brief course summary.
- 4. Respondent shall obey all federal, state and local laws/rules governing the practice of veterinary medicine in this state.
 - 5. Respondent shall bear all costs of complying with this Order.
- 6. This Order is conclusive evidence of the matters described and may be considered by the Board in determining an appropriate sanction in the event a subsequent violation occurs. In the event Respondent violates any term of this Order, the Board may, after opportunity for Informal Interview or Formal Hearing, take any other appropriate disciplinary action authorized by law, including suspension or revocation of Respondent's license.

REHEARING/APPEAL RIGHTS

Respondent has the right to petition for a rehearing or review of this Order. Pursuant to A.R.S. § 32-2234 (H) and § 41-1092.09 the petition must be filed with the Board within thirty-five (35) days from the date of mailing if the Order was served via certified mail. Pursuant to A.A.C. R3-11-904 (C), the petition must set forth legally sufficient reasons for granting the rehearing or review. The filing of a petition for rehearing or review is required to preserve any rights of appeal to the Superior Court that the party may wish to pursue.

This Order shall be effective and in force upon the expiration of the above time period for filing a motion for rehearing or review with the Board. However, the timely filing of a motion for rehearing or review shall stay the enforcement of the Board's Order, unless, pursuant to A.A.C. R3-11-904 (F), the Board has expressly found good cause to believe that this Order shall be effectively immediately upon the issuance and has so stated in this Order.

Dated this 30th day of Maul, 2022.

Arizona State Veterinary Medical Examining Board Jim Loughead

Chairman

y: Lectoral

Victoria Whitmore, Executive Director

Original of the foregoing filed this 30^{4} day of 30^{4} day of 30^{4} with the:

Arizona State Veterinary Medical Examining Board 1740 W. Adams St., Ste. 4600